									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								109394-100 2					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			3			} ·		RATE FEE			RATE	FEE	
FOR			NUMBER FILED . NO			BER EXTRA		BASIC F	EE 385.0	OF	BASIC FE	E 770.00	
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* 1	f the differenc	e in column 1 is	less than :	ess than zero, enter "0" in column 2				TOTAL		OR		╂	
CLAIMS AS AMENDED - PART II										<u></u>		THAN	
4	-1-05	(Column 1)		(Column 2) (Column 3)			_	SMALL	ENTITY	OR		ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE	
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							L	TOTAL		اا	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	~	DUII. PEE			AUUII. PEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL' FEE		RATE	ADDI- TIONAL FEE	
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	Independent		Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H			OR	700-		
• #	the ntry in colum	nn 1 is less than the	entry in colu	mn 2, write ℃	in colu	mn 3.	L	145=		ОЯ	+290=		
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FORM PTO-875 (Rev. 10/03)

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Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unique if displays a valid CAIB control number PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Feez pursuant to the Conzolidated Appropriations Act, 2005 (H.R. 4818).) **Application Number** For Art Unit Examiner This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): <u>Fee</u> Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 SBO Two months (37 CFR 1.17(B)(2)) \$450 \$225 Three months (37 CFR 1.17(a)(3)) \$1020 \$510 Four months (37 CFR 1.17(a)(4)) \$1590 \$795 Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to **Deposit Account Number** 502659 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number 52 attorney or agent under 37 CFR 1.34. Registration number if acting under 97 CFR 1.34 Engene 613 ~566-054 Typed or printed name Tetephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one Total of forms are submitted.

This collection of information is required by 37 CFR 1.136(s). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Condentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the complete depotestion from the the Usery depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officers.

U.S. Petert and T-reducing Officer 1.00 NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TD: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Byou read assistance in completing the form, call 1-800-PTO-9199 and school option 2.

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